

Exhibit “B”

**NYC DEPARTMENT OF FINANCE
OFFICE OF THE CITY REGISTER**

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RECORDING AND ENDORSEMENT COVER PAGE

PAGE 1 OF 3

Document ID: [REDACTED] Document Date: 08-25-2009 Preparation Date: 08-25-2009
Document Type: INITIAL COOP UCC1 COOPERATIVE WITH ADDENDUM
Document Page Count: 2

PRESENTER:

A+ ABSTRACT, INC.
274 FOURTH AVENUE
2ND FLOOR
BROOKLYN, NY 11215
[REDACTED]

RETURN TO:

A+ ABSTRACT, INC.
274 FOURTH AVENUE
2ND FLOOR
BROOKLYN, NY 11215
[REDACTED]

PROPERTY DATA

Borough	Block	Lot	Unit	Address
MANHATTAN	1363	31	Entire Lot 9B	434 EAST 52ND STREET
Property Type: SINGLE RESIDENTIAL COOP UNIT				

CROSS REFERENCE DATA

CRFN _____ or Document ID _____ or _____ Year _____ Reel _____ Page _____ or File Number _____

PARTIES

DEBTOR:

EIKO IMAI
434 EAST 52ND STREET, APT. 9B
NEW YORK, NY 10022

SECURED PARTY:

JP MORGAN CHASE BANK, N.A.
1111 POLARIS PARKWAY
COLUMBUS, OH 10022

FEES AND TAXES

Mortgage		Filing Fee:	
Mortgage Amount:	\$	0.00	\$ 0.00
Taxable Mortgage Amount:	\$	0.00	NYC Real Property Transfer Tax:
Exemption:			\$ 0.00
TAXES: County (Basic):	\$	0.00	NYS Real Estate Transfer Tax:
City (Additional):	\$	0.00	\$ 0.00
Spec (Additional):	\$	0.00	
TASE:	\$	0.00	
MTA:	\$	0.00	
NYCTA:	\$	0.00	
Additional MRT:	\$	0.00	
TOTAL:	\$	0.00	
Recording Fee:	\$	40.00	
Affidavit Fee:	\$	0.00	



**RECORDED OR FILED IN THE OFFICE
OF THE CITY REGISTER OF THE
CITY OF NEW YORK**

Recorded/Filed 08-28-2009 08:50
City Register File No.(CRFN): [REDACTED]

Annette M. Hill

City Register Official Signature

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. SEND AN ACKNOWLEDGMENT TO: (Name and Address)	
<p>The Law Office of Stan G. Horowitz 380 Lexington Avenue, Suite 1700 New York, New York 10188</p>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names					
1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
	lma		Eiko		
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
434 East 52nd Street, Apt. 8B			New York	New York	10022 USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names					
2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE	
3. SECURED PARTY'S NAME (or NAME OF TOTAL ASSIGNEE OF ASSIGNOR S/P) - insert only one secured party name (3a or 3b)					
3a. ORGANIZATION'S NAME					
JP Morgan Chase Bank, N.A.					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE COUNTRY
1111 Polaris Parkway			Columbus	OH	43240 USA

4. This FINANCING STATEMENT covers the following collateral:

Debtor(s) Interest in the stock(167 shares) for Unit #9B at 434 East 52nd Street, New York, New York 10022 plus the Proprietary Lease with Southgate Owners Corp. and any replacement or additional stock and any lease amendments or replacements. This cooperative property financing statement shall be effective until a termination is filed.

Loan No. [REDACTED]

5. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> LESSOR/LESSOR <input type="checkbox"/> CONSIGNEE/CONSIGNOR <input type="checkbox"/> BAILEE/BAILO <input type="checkbox"/> SELLER/BUYER <input type="checkbox"/> AG. LIEN <input type="checkbox"/> NON-UCC FILING	
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(s) on Debtor(s) (ADDITIONAL FEE) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA Horowitz Reference Number [REDACTED]	


UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME + PHONE OF CONTACT AT FILER (optional)	
B. SEND AN ACKNOWLEDGMENT TO: (Name and Address)	
<p>The Law Office of Stan G. Horowitz 380 Lexington Avenue, Suite 1700 New York, New York 10168</p>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. Complete EITHER 19a. or 19b.	19a. This COOPERATIVE ADDENDUM <input checked="" type="checkbox"/> accompanies a FINANCING STATEMENT	19b. File Number assigned to the Initial FINANCING STATEMENT
20. FIRST DEBTOR OF RECORD (Complete either 20a. or 20b. but not both)		
20a. ORGANIZATION'S NAME		
OR	20b. INDIVIDUAL'S LAST NAME Ima	FIRST NAME Elko MIDDLE NAME SUFFIX
21. FIRST SECURED PARTY OF RECORD (Complete either 21a. or 21b. but not both)		
21a. ORGANIZATION'S NAME JP Morgan Chase Bank, N.A.		
OR	21b. INDIVIDUAL'S LAST NAME	FIRST NAME MIDDLE NAME SUFFIX
22. This COOPERATIVE ADDENDUM covers: (Check one.) <input checked="" type="checkbox"/> One COOPERATIVE INTEREST <input type="checkbox"/> More than one COOPERATIVE INTEREST		<p>IMPORTANT:</p> <p>This COOPERATIVE ADDENDUM is for use when the collateral includes a COOPERATIVE INTEREST.</p> <p>Only as to collateral which is a COOPERATIVE INTEREST, but not as to other collateral, the Initial FINANCING STATEMENT to which this COOPERATIVE ADDENDUM relates shall be effective for 50 years from the date of filing the Initial FINANCING STATEMENT.</p>
23. Unit use(s): (Check all that apply.)		
<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Parking <input type="checkbox"/> Storage <input type="checkbox"/> Other (if checked, complete 23e).		
23a. Specify other Unit use(s):		
24. COOPERATIVE UNIT REAL PROPERTY FILING DATA:		26. Complete if applicable. (If check, complete 26a.)
24a. ADDRESS NUMBER and STREET: (One only) 434 East 52nd Street		<input type="checkbox"/> The purpose of this COOPERATIVE ADDENDUM is to SUBORDINATE this security interest to another security interest in the same COOPERATIVE INTEREST
24b. COMMUNITY (e.g. City, Town, Village or Borough): New York		26a. FILE NUMBER of security interest being given consensual priority:
24c. COUNTY: New York		27. Check if Applicable: <input type="checkbox"/> The security agreement provides for FUTURE ADVANCES.
24d. DISTRICT:		28. MISCELLANEOUS:
24e. SECTION:		
24f. BLOCK: 1363		
24g. LOT: 31		
24h. UNIT NUMBER(S) or DESIGNATION(S): 9B		
25. Name of the COOPERATIVE ORGANIZATION Southgate Owners Corp.		

NYC DEPARTMENT OF FINANCE OFFICE OF THE CITY REGISTER This page is part of the instrument. The City Register will rely on the information provided by you on this page for purposes of indexing this instrument. The information on this page will control for indexing purposes in the event of any conflict with the rest of the document.				
RECORDING AND ENDORSEMENT COVER PAGE				
Document ID:		Document Date:		PAGE 1 OF 5
Document Type:		Preparation Date:		
Document Page Count:		COOPERATIVE WITH ADDENDUM		
PRESENTER: PARAMOUNT LAND INC 584 MAIN ST ISLIP, NY 11751			RETURN TO: PARAMOUNT LAND INC 584 MAIN ST ISLIP, NY 11751	
PROPERTY DATA				
Borough	Block	Lot	Unit	Address
MANHATTAN	1363	31	Entire Lot 9B	434 E 52ND STREET
Property Type: SINGLE RESIDENTIAL COOP UNIT				
CROSS REFERENCE DATA				
CFEN:				
PARTIES				
DEBTOR: EIKO IMAI 434 E 52ND STREET, 9B NEW YORK, NY 10022			SECURED PARTY: JPMORGAN CHASE BANK, NA 1111 POLARIS PARKWAY COLUMBUS, OH 43420	
<input checked="" type="checkbox"/> Additional Parties Listed on Continuation Page				
FEES AND TAXES				
Mortgage :			Filing Fee:	
Mortgage Amount:	\$	0.00	\$	0.00
Taxable Mortgage Amount:	\$	0.00	NYC Real Property Transfer Tax:	
Exemption:			\$	0.00
TAXES: County (Basic):	\$	0.00	NYS Real Estate Transfer Tax:	
City (Additional):	\$	0.00	\$	0.00
Spec (Additional):	\$	0.00		
TASF:	\$	0.00		
MTA:	\$	0.00		
NYCTA:	\$	0.00		
Additional MRT:	\$	0.00		
TOTAL:	\$	0.00		
Recording Fee:	\$	40.00		
Affidavit Fee:	\$	0.00		
			RECORDED OR FILED IN THE OFFICE OF THE CITY REGISTER OF THE CITY OF NEW YORK Recorded/Filed 05-24-2016 11:43 City Register File No. (CFEN):	
			 <i>Gina M. Hill</i> City Register Official Signature	

NYC DEPARTMENT OF FINANCE
OFFICE OF THE CITY REGISTER

RECORDING AND ENDORSEMENT COVER PAGE (CONTINUATION)

PAGE 2 OF 5

Document ID: [REDACTED]
Document Type: UCC3 ASSIGNMENT

Document Date: 05-23-2016

Preparation Date: 05-24-2016

PARTIES

DEBTOR:
YOSKE IMAI
434 E 52ND STREET, 9B
NEW YORK, NY 10022

PARTIES

NEW SECURED PARTY:
MTGLQ INVESTORS, LP

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. SEND ACKNOWLEDGMENT TO: (Name and Address)
Paramount Land, Inc. 584 Main Street Islip, NY 11751

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #	1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.
08/28/2009	<input checked="" type="checkbox"/>
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.	
3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.	
4. <input checked="" type="checkbox"/> ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 8.	
5. AMENDMENT (PARTY INFORMATION). This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.	
<input type="checkbox"/> CHANGE name and/or address. Please refer to the detailed instructions in regards to changing the name/address of a party.	<input type="checkbox"/> DELETE name. Give record name to be deleted in item 6a or 6b.
<input type="checkbox"/> ADD name. Complete item 7a or 7b and also item 7c; also complete items 7e-7g (if applicable).	
6. CURRENT RECORD INFORMATION	
6a. ORGANIZATION'S NAME	
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME
IMAI	EIKO
7. CHANGED (NEW) OR ADDED INFORMATION	
7a. ORGANIZATION'S NAME	
OR MTGLQ INVESTORS, LP	
7c. MAILING ADDRESS	
6011 CONNECTION DRIVE, 5th FLOOR	CITY
IRVING	STATE
TX	POSTAL CODE
75039	COUNTRY
USA	
7d. SEE INSTRUCTIONS	7e. TYPE OF ORGANIZATION
Not Applicable	7f. JURISDICTION OF ORGANIZATION
ADD'L INFO RE ORGANIZATION DEBTOR	7g. ORGANIZATIONAL ID #, if any
	<input type="checkbox"/> NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

Debtor(s) interest in the stock (167 shares) for Unit 9B at 434 E 52nd Street, New York, NY 10022 plus the Proprietary Lease with Southgate Owners Corp. and any replacement or additional stock and any lease amendments or replacements. This cooperative property financing statement shall be effective until a termination is filed.

B-1363 L-31

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment; if this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment.			
9a. ORGANIZATION'S NAME			
OR JPMORGAN CHASE BANK, N.A.			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			
Loan			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

08/28/2009

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

JPMORGAN CHASE BANK, N.A.

OR

13. Use this space for additional information

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EIKO IMAI AND YOSKE IMAI

Debtor(s) interest in the stock (167 shares) for Unit 9B at 434 E 52nd Street, New York, NY 10022 plus the Proprietary Lease with Southgate Owners Corp. and any replacement or additional stock and any lease amendments or replacements. This cooperative property financing statement shall be effective until a termination is filed.

UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

14. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

08/28/2009

15. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 8 on Amendment form)

15a. ORGANIZATION'S NAME

JPMORGAN CHASE BANK, N.A.

OR

15b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

16. MISCELLANEOUS

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

17. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (17a or 17b) - do not abbreviate or combine names

17a. ORGANIZATION'S NAME

OR

17b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

IMAI

YOSKE

17c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

434 E 52nd STREET, APT. 9B

NEW YORK

NY

10022

USA

17d. SEE INSTRUCTIONS

ADD'L INFO RE

17e. TYPE OF ORGANIZATION

17f. JURISDICTION OF ORGANIZATION

17g. ORGANIZATIONAL ID #, if any

Not Applicable

ORGANIZATION DEBTOR

☐ NONE

18. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (18a or 18b) - do not abbreviate or combine names

18a. ORGANIZATION'S NAME

OR

18b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

18c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

18d. SEE INSTRUCTIONS

ADD'L INFO RE

18e. TYPE OF ORGANIZATION

18f. JURISDICTION OF ORGANIZATION

18g. ORGANIZATIONAL ID #, if any

Not Applicable

ORGANIZATION DEBTOR

☐ NONE

19. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (19a or 19b) - do not abbreviate or combine names

19a. ORGANIZATION'S NAME

OR

19b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

19c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

19d. SEE INSTRUCTIONS

ADD'L INFO RE

19e. TYPE OF ORGANIZATION

19f. JURISDICTION OF ORGANIZATION

19g. ORGANIZATIONAL ID #, if any

Not Applicable

ORGANIZATION DEBTOR

☐ NONE

20. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (20a or 20b)

20a. ORGANIZATION'S NAME

OR

20b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

20c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

21. ADDITIONAL SECURED PARTY'S NAME (or Name of TOTAL ASSIGNEE) - insert only one name (21a or 21b)

21a. ORGANIZATION'S NAME

OR

21b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

21c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY